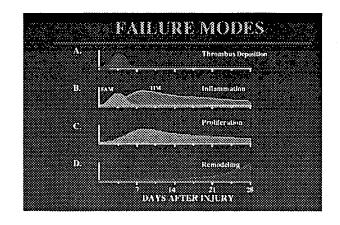
ACCELERATED ATHEROSCLEROSIS - MAGNITUDE OF PROBLEM - PHARMACOLOGICAL APPROACH - MECHANISM: ROLE OF ENDOTHELIUM - VASCULAR RECONSTRUCTION - ENDOTHELIAL IMPLANTS

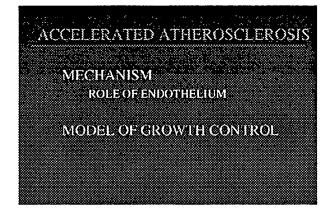
CARDIOVASCULAR DISEASES: ANNUAL STATISTICS WORLD: 50,500,000 deaths USA: 1,000,000 deaths 100,000,000 hospital days 1,500,000 procedures 40-50% failure rate

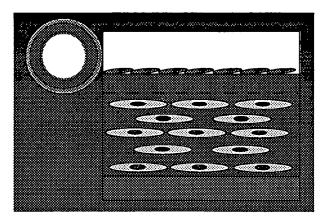
ACCELERATED	TIME	
BALLOON ANGIOPLASTY	3	25-50%
LASER ANGIOPLASTY	6	36%
ATHERECTOMY	6	40.50%
RNDOVASCIEARSTRATS	3	20-50%

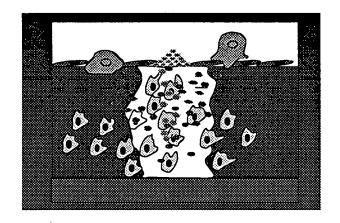
MAGNITUDE OF PROBLEM Angioplasty Endovascular stents Bypass grafts Organ transplantation

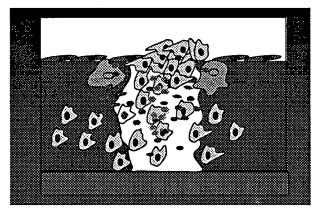


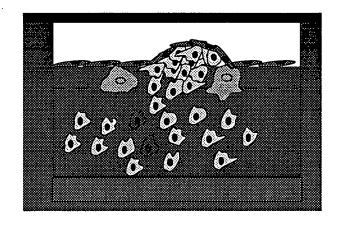
PHARMACOLOGICAL APPROACHS HAVE FAILED • multi-factorial mechanisms of accelerated atherosclerosis not handled by isolated drug administration • drug therapy provides open loop, pharmacological dosing rather than physiological control

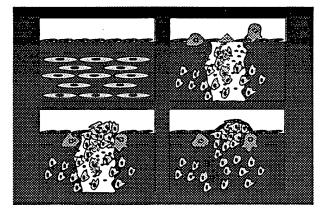


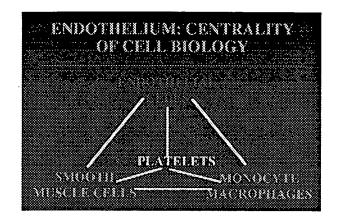


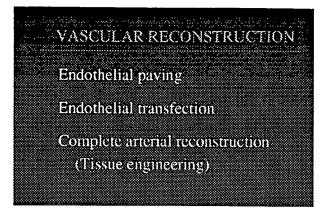


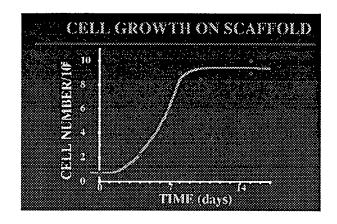


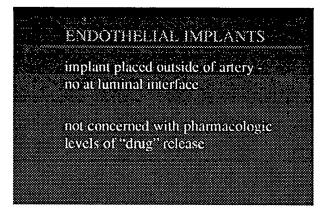


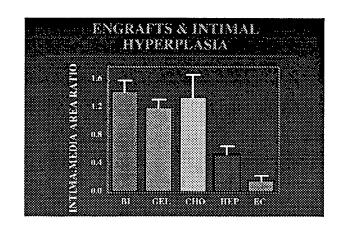


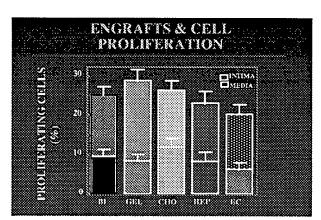




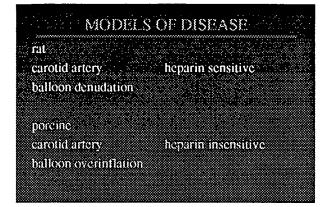


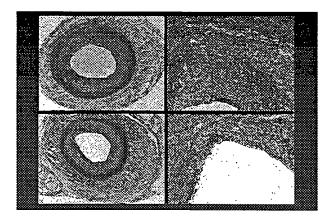


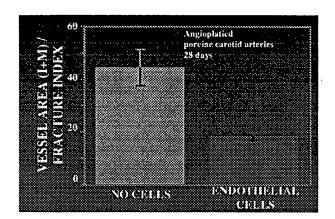




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ENDOTHELIAL IMPLANTS

- general impression that endothelium needed to be restored at luminal interface to exert effect
- · endothelial restoration inefficient and transient
- there is normal endothelium adjacent to denuded or injured endothelium and it cannot control disease
- models and disease that are resistant to the infusion of endothelial products

ENDOTHELIAL IMPLANTS

- recapitulate biochemical control without reconstructing the arterial architecture
- significant departure from controlled drug delivery
- physiologial control without pharmacological dosing



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